

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000062249

1. Entity Name  
RISDON & COMPANY, INC.



Principal Place of Business  
361 WINCHESTER PLACE  
LONGWOOD, FL 32779

Mailing Address  
361 WINCHESTER PLACE  
LONGWOOD, FL 32779



04262004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3341689

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fees Required

**5. Name and Address of Current Registered Agent**

RISDON, ALBERT L  
361 WINCHESTER PLACE  
LONGWOOD, FL 32779

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

*no change*  
SIGNATURE Albert L. Risdon, Pres 4/25/04  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

000000138242  
04/29/04-80071-019 150.00

**10. OFFICERS AND DIRECTORS**

TITLE P  
NAME RISDON, ALBERT L  
STREET ADDRESS 361 WINCHESTER PLACE  
CITY-ST-ZIP LONGWOOD, FL 32779

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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Albert L. Risdon, Pres 4/25/04 (407) 797-6300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #